

Application or Decked Number  
09/998849

**Substitute for Form PTO-875**

**SMALL ENTITY**

**OR**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.15(a))		
TOTAL CLAIMS (37 CFR 1.15(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.15(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.15(d))

RATE	FEE
	\$ _____
x \$ _____	
x \$ _____	
+ \$ _____	
<b>TOTAL</b>	

RATE	FEE
x 1 _____ =	\$ _____
x 5 _____ =	
+ 5 _____ =	
<b>TOTAL</b>	

\* If the difference in column 1 is less than zero, enter "U" in column 2.

**SMALL ENTITY**

**OR**

2-24-08		(Column 1)	(Column 2)	(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (of CFR 1.100-6)	28	24	4
	Includable (of CFR 1.100-6)	6	5	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.100-6)			

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
+ \$ _____	
<b>TOTAL ADD'L FEE</b>	

RATE	ADDITIONAL FEE
x <u>50</u> .	200 <sup>00</sup>
x <u>200</u> .	200 <sup>00</sup>
+ 5 .	
TOTAL ADDL FEE	400 <sup>00</sup>

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total of OFR 1,162	28	28	2
Independent of OFR 1,162	6	6	0	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (OF OFR 1,162)

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
K\$ _____ =	
K\$ _____ =	
¢\$ _____ =	
TOTAL ADDL FEE	

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total of CFA Lines	28	28	
Independent of CFA Lines	6	6	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFA 1.18(a))

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
+ \$ _____	
<b>TOTAL ADD'L FEE</b>	

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
+ \$ _____	
<b>TOTAL ADDITIONAL FEE</b>	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "J".  
The Highest Number Previously Paid For IN THIS SPACE is: 1

**The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.**

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**If you need assistance in completing the form, call 1-800-PTO-6199 and select option 2.**